



KENTUCKY LABOR-MANAGEMENT CONFERENCE INC.

P.O. BOX 4248, FRANKFORT, KENTUCKY 40604 (502) 564-3070

May 20, 2005

Dear Labor-Management Participant:

Enclosed is a copy of the nomination form for the 2005 Kentucky Labor-Management Conference Award. This award is presented annually at the Kentucky Labor-Management Conference Banquet.

Each year the Conference Board of Directors solicits nominations from the entire Labor-Management community. After reviewing all nominations, the Board determines the outstanding nominee from Labor and Management "Who has most demonstrated his or her commitment to the promotion of labor-management cooperation in Kentucky."

Any person representing a Kentucky Labor organization or who represents Management of a firm doing business in Kentucky is eligible for nomination. The nominee must be actively involved in a cooperative Labor-Management Program or must be known for his or her work in the promotion of the principles of Labor-Management Cooperative Programs on a statewide, industry-wide, area-wide, in-plant, or public sector basis. Employees of the Kentucky Department of Labor and Kentucky Cabinet for Economic Development are not eligible.

Please follow the instructions carefully in completing this form and return it to Kentucky Labor-Management Conference Inc., P. O. Box 4248, Frankfort, KY 40604. **The deadline for nominations** is July 20, 2005.

We appreciate your participation in helping the 2005 Kentucky Labor-Management Conference Board of Directors determine the award recipients.

Sincerely,

Tom Cannady
Executive Director

Enclosure



**2005 KENTUCKY LABOR AND MANAGEMENT AWARD
NOMINATION FORM**

Guidelines: Please print or type all information. Be as specific and as detailed as possible. The more legible and specific the information is the greater chance your nominee will be selected for a Conference Award. The three references you provide will be contacted only after the nominee passes preliminary judging by the Board of Directors. Therefore, the information you provide is vital to the nominee's selection for final judging.

NOMINEE:

Name _____ Title of Job _____

Company or Organization _____

Address _____

Home Phone _____ and/or Work Phone _____

Nominee's Place of Employment _____

TYPE OF LABOR-MANAGEMENT PROGRAM NOMINEE IS INVOLVED IN:

Statewide _____ In-Plant _____

Industry-wide _____ Public Sector _____

Area-wide _____

NOMINATING ORGANIZATION/INDIVIDUAL:

Name _____

Address _____ Phone _____

Contact Person _____

REFERENCES: Please list three persons and their phone numbers who know of the nominee's labor-management activities:

Name _____ Phone _____

Name _____ Phone _____

Name _____ Phone _____

REASONS FOR MAKING NOMINATION

The information that you provide will determine if the Board of Directors selects your nominee for further consideration. Therefore, it is important that you follow the instructions carefully.

- * Please print or type all information and be as specific and detailed as possible.
- * **Do not mention nominee's name on this portion of the form.** Refer to the nominee as he or she so entries may be judged without bias.
- * On each entry form, only one person may be nominated; nominations for couples, groups, or organizations are not eligible.
- * You must answer all of the following questions for your nominee to be considered for a Kentucky Labor-Management Conference Award.

Is your nominee employed? Full Time _____ Part Time _____ Retired _____

Is your nominee representing labor or management? L _____ M _____

In what capacity is your nominee involved in a Labor-Management Cooperative Program?

Describe the Labor-Management Cooperative Program in which your nominee is involved and list its accomplishments to date.

Why should your nominee be considered the "outstanding" labor or management representative?